

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 2121-0178P	
Application Number 10/695,744-Conf. #7652		Filed October 30, 2003	
For PRENATAL DIAGNOSIS METHOD ON ISOLATED FOETAL CELL OF MATERNAL BLOOD			
Art Unit 1634		Examiner C. J. Myers	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 450 00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____

☐ Applicant claims small entity status. See 37 CFR 1.27

☐ A check in the amount of the fee is enclosed

☐ Payment by credit card. Form PTO-2038 is attached

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

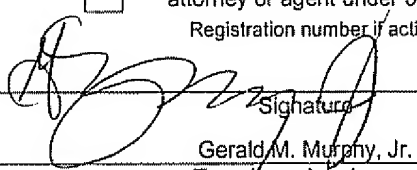
☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record Registration Number 28,977

☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____



Signature
Gerald M. Murphy, Jr.
Typed or printed name

March 28, 2007

Date

(703) 205-8000

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. see below

☐ Total of 1 forms are submitted.